Request for Appropriations (RFA) Form

Note: Any information provided on the RFA form may be made public! Additional instructions for filling out the form can be found on the RFA Instructions. Please contact the Legislative Fiscal Analyst's Office for a copy.

REQUESTER INFORMATION *(Required)*

Legislator: First Name _Jake_ Last Name _Anderegg_ Date _01/25/2023_

SECTION 1: REQUEST DETAILS *(Required)*

1.1 Does this request fund the fiscal impact of proposed legislation?

Yes ☐   No ☑

If yes, STOP! Do not submit an RFA for the fiscal impact of proposed legislation. RFA forms submitted to LFA for processing will not be entered into the system online if they are associated with legislation.

1.2 Funding request name (No more than six words; do not identify a non-state agency in the name)

New Choices

1.3 Funding request description (3-5 sentences)

Rate increase for certain assisted living facilities (Medi billing code T2033)mLicensed Community Residentail Care Pheasant Hollow.

1.4 For more information on the project, the Legislative Fiscal Analyst's Office should contact:

- Name: Preston Cochrane
- Organization: Valley Behavioral Health
- Position: Vice President
- Email: prestonc@valleycares.com
- Phone: 801-891-7775

1.5 Appropriations Committee Recommended to hear Request:

☐ Business, Economic Development, and Labor (BEDL)

☐ Executive Appropriations Committee (EAC)

☐ Executive Offices and Criminal Justice (EOCJ)

☐ Higher Education (Higher Ed)

☐ Infrastructure and General Government (IGG)

☐ Natural Resources, Agriculture, and Environmental Quality

☐ (NRAEQ) Public Education (Public Ed)

☑ Social Services (SS)

SECTION 2: FUNDING INFORMATION *(Required)*

2.1 Identify which fund the appropriation should come from:
Note: Funding will be appropriated for the New Year (or Budget Year). You can change this in the online form.

- General Fund: One-time: $_____   Ongoing: $ 500____
- Income Tax Fund: One-time: $_____   Ongoing: $_____
- Transportation Fund: One-time: $_____   Ongoing: $_____
- Federal Funds: One-time: $_____   Ongoing: $_____
- ARPA Federal: One-time: $_____   Ongoing: $_____
- Other*:   One-time: $_____   Ongoing: $_____
    *Indicate fund name

2.2 Should unused funding be returned to the state at the end of the fiscal year?

Yes ☑   No ☐

2.3 Is this project scalable if the Legislature does not fund the full requested amount?

Yes ☐   No ☑

2.3a If yes on 2.3, please provide a short explanation describing how the project might be scaled. *(3-5 sentences)*

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SECTION 3: AGENCY INFORMATION *(Required)* *(NOTE: State funding CANNOT be appropriated to a non-state agency.)*

3.1: Agency with fiscal oversight (agency that will receive the funding): Human Services ▼

3.2: Type of entity to receive (select all that apply)

Government ☐   Government Not for Profit (ex., school district foundation) ☐

Private Not for Profit ☑   Private for Profit ☐

SECTION 4: PERFORMANCE OUTCOME MEASUREMENT *(Required)*

4.1: What is the statewide purpose of this project or program? *(Select up to 3 from the list below)*

Economy ☐	Governance & Civic Engagement ☐	Justice ☐	Other_____
Education ☐	Health & Wellbeing ☑	Recreation ☐	
Environment ☐	Infrastructure & Mobility ☑	Safety & Security ☑	

4.2: What is this project or program intended to accomplish? *(3-5 sentences)*

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Keep severe disabeled adults housed and supported.
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4.3: How will the Legislature know whether the project or program is successful? *(Recommend a short-term target for measuring progress; 3-5 sentences)*

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Audit and HHS oversight
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SECTION 5: ITEMIZED BUDGET *(Required)*

5.1: Attach a budget proposing how the funding will be used. Template available on the RFA app on the secure site or from LFA.

SECTION 6: OTHER SUPPORTING DOCUMENTS *(Not required)*

6.1 Intent Language: Provide any intent language directing the use of the funding. Intent language cannot change statue or identify a non-state entity to receive funding. Follow this template: "The Legislature intends that ($ amount) from the (funding source) provided by this item be used for (include specific details on what the money should be used to accomplish; do not name any non-state entity).

6.2 Previous State Funding: Template available on the RFA app on the secure site or from LFA.

6.3 Other Notes: Attach any additional documents you feel are relevant to the Legislature's decision to fund the request.

Request for Appropriation Budget Template

Request Title:	New Choices
Sponsor:	Senator Jake Anderegg

Step 1. Revenue

		Funding Source
Amount Requested	$500,000	General Fund
Other Revenue Sources	$ -	
Total Revenues:	$ 500,000.00	
	Difference between Revenue & Expenditures	$ -

Step 2. Expenditures

Amounts		Details	
Personnel		Number of personnel supported:	
Travel		Nature of travel:	
Equipment/Supplies		Types of equipment/supplies to be purchased:	
Pass-through	$500,000	Intended recipient(s) of pass-through funds:	community providers
Licenses		Description of licenses (number, cost per license, etc.)	
Other		Description of other expenses	
Other		Description of other expenses	
Other		Description of other expenses	
Total Expenditures:	$ 500,000.00		